IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Alexander et al.

Title: HERMETIC WIPE CONTAINER

Appl. No.: 10/776,017

Filing Date: 02/10/2004

Examiner: MOHANDESI, JILA M

Art Unit: 3728

Confirmation No · 9075

AMENDMENT TRANSMITTAL

Mail Stop Amendment Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

[X] The fee required for additional claims is calculated below:

	Claims As		Previously		Extra Claims				Additional
	Amended		Paid For		Present		Rate		Claims Fee
Total Claims:	41	-	41	=	0	х	\$50.00	=	\$0.00
Independent Claims:	6	-	6	=	0	x	\$200.00	=	\$0.00
First p	resentation	of ar	ıy Multiple I	Depend	lent Claims:	+	\$360.00	=	\$0.00
					CLAIMS	FEI	E TOTAL	=	\$0.00

]]	Applicant hereby petitions for an extentotal number of months checked below		nder 37 C.F.R. §1.136(a)	for the				
_	_	Estancian for seasons fled within the	Guet month.	\$120.00	\$0.00				
[J	Extension for response filed within the Extension for response filed within the		*	\$0.00				
[]			\$1,020.00					
[]	Extension for response filed within the		\$0.00					
[J	Extension for response filed within the			\$0.00				
[]	Extension for response filed within the	\$2,160.00	\$0.00					
			NSION FEE TOTAL:	\$0.00					
[]	Statutory Disclaimer Fee under 37 C.F	.R. 1.20(d):	\$130.00	\$0.00				
		CLAIMS, EXTENSION	AIMER FEE TOTAL:	\$0.00					
[]	Small Entity	y Fees Apply (subtract 1/2 of above):	\$0.00				
			Extension	Fees Previously Paid:	\$0.00				
				TOTAL FEE:	\$0.00				
• •		If any extensions of time are needed for ant hereby petitions for such extension uch extensions fees to Deposit Account N	inder 37 C.F.F						
		Please direct all correspondence to the	undersigned a	ttorney or agent at the add	tress				
ind	ica	red below.	underoigned o	normey or agent at the aut	1035				
		Respectfully submitted,							
Da	te_	8/20/2007	Ву	/Adam M. Gustafson/					
FO	LE	Y & LARDNER LLP	1	dam M. Gustafson					
Customer Number: 26371			Attorney for Applicant						
Te	lepi	ione: (414) 297-5652	Registration No. 54,601						
Fac	sir	nile: (414) 297-4900							